Revised

Revision: HCFA-PM-91-4 (BPD) Supplement 1 to Attachment 2.6-A

Page 1

OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Kentucky

INCOME ELIGIBILITY LEVELS

- A. MANDATORY CATEGORICALLY NEEDY
- 1. AFDC-Related Groups Other Than Poverty Level Pregnant Women and Infants:

Family Size	Need Standard	Payment Standard	Maximum Payment Amounts
1	\$394		\$186
2	\$460		\$225
3	\$526	· ·	\$262
4	\$592		\$328
5	\$658		\$383
6	\$724		\$432
7 or more	\$790		\$482

2. Pregnant Women and Infants under Section 1902(a)(10)(A)(i)(IV) of the Act:

Effective July 1, 1990, for pregnant women and infants under Section 1902(a)(10)(A)(i)(IV) of the Act, the income eligibility level is 185 percent of the Federal poverty level (as revised annually in the Federal Register) for the family size involved.

Revision: HCFA-PM-92-1 FEBRUARY 1992

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Kentucky

A. MANDATORY CATEGORICALLY NEEDY (Continued) (A) 94.7 3. For children under Section 1902(a)(10)(i)(VI) of the Act (children who have attained age 1 but have not attained age 6), the income eligibility level is 133 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

4. For children under Section 1902(a)(10)(i)(VII) of the Act (children who were born after September 30, 1983 and have attained age 6 but have not attained age 19), the income eligibility level is 100 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

TN No. 92-5 Approval Date NOV 14 1994 Effective Date Supersedes TN No. 92-1

Rowision: HCFA-PM-91-4 (BPD) August 1991	SUPPLEMENT 1 TO ATTACHMENT 2.6-Page 3 OMB No.: 0938-
STATE PLAN UNDER TITLE : State: Kentucky	XIX OF THE SOCIAL SECURITY ACT
INCOME ELIGIBILE B. OPTIONAL CATEGORICALLY NEEDY GROUPOVERTY LEVEL	ITY LEVELS (Continued) UPS WITH INCOMES RELATED TO FEDERAL
1. Pregnant Women and Infants The levels for determining incompregnant women and infants und 1902(a) (10)(A)(ii)(IX) and 1902(1)	come eligibility for optional groups of der the provisions of sections)(2) of the Act are as follows:
Based on 185 percent of the (more than 133 percent and no	official Federal income poverty level more than 185 percent).
Family Size	Income Level
1	\$
	\$
3	\$
4	\$
5	\$
IN No. 92-1 Supersedes Approval Date NOV 1 IN No. 87-15	4 1994 Effective Date 1-1-392

HCFA ID: 7985E

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Revision:	HCFA-PM-91-4 August 1991	(BPD)	SUPPLEMENT 1 TO ATTA Page 4 OMB No.: 0938-	ACHMENT 2.6
	STATE PLAN	UNDER TITLE XIX C	F THE SOCIAL SECURITY ACT	,
	State:	Kentucky		
	INC	OME ELIGIBILITY L	EVELS (Continued)	-
B. POVERT	CATEGORICALI Y LEVEL	LY NEEDY GROUPS W	ITH INCOMES RELATED TO FE	DERAL
2. <u>Chi</u>	ldren under age	19		
age 1902	but are under 2(1)(2) of the	19 years of age us Act are as follow	•	6 years of ction
Fede	eral income pov	percent (no mo erty line.	ore than 100 percent) of	the officia
	Family Si	<u>ze</u>	Income Level	
-	1 2 3 4 5 6 7 8 9		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	

TN No. 92-1 Supersedes TN No. 91-3	Approval Date	NOV 14 1994	Effective	Date	1-1-92
	1		HCFA ID.	70050	

Revision: HCFA-PM-92-1

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FEBRUARY 1992

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT	
state: Kentucky	
INCOME ELIGIBILITY LEVELS (Continued)	
3. Aged and Disabled Individuals	
The levels for determining income eligibility for groups of aged disabled individuals under the provisions of section 1902(m)(4) Act are as follows:	i and of the
Based on percent of the official Federal income poverty l	ine.
Family Size Income Level	
1	

5

If an individual receives a title II benefit, any amount attributable to the most recent increase in the monthly insurance benefit as a resultofa title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual Federal poverty level.

For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.

For individuals not receiving title II income, the revised poverty levels are effective no later than the beginning of the month following the date of publication.

TN No. Approval Date NOV 14 1994 Effective Date Supersedes 92-1 TN No.

HCFA ID:

7985E

Rowision: HCFA-P August		BPD)	SUPPLEMEN Page 5 OMB No.:	T 1 TO ATTACH	MENT 2.6-
STATE	PLAN UNDER	TITLE XIX OF	THE SOCIAL SI	ECURITY ACT	٠.
State:	Kentucky				· _
	INCOME EL	IGIBILITY LE	VELS (Continue	ed)	-
3. Aged and Di	sabled Indiv	<u>iduals</u>			
The levels disabled in Act are as	aividuais un	ing income e der the prov	ligibility for isions of sect	r groups of a tion 1902(m)(ged and 4) of the
Based on	percent	of the offic	cial Federal i	income povert	y line.
<u>Far</u>	mily Size		Income Level		
	1		\$		
			\$		
	3		\$		
	4		\$		
	5		\$		
	·		·		
				•	
	. •				

Re	ewision:		-PM-91- st 1991	-4 (BPD)		SUPPLEMEN Page 6 OMB No.:		TACHMENT 2.6
				UNDER TITLE	XIX OF	THE SOCIAL S	ECURITY A	CT .
		State	<u> </u>	Kentucky				
			<u>II</u>	COME ELIGIBI	LITY LEV	ELS (Continu	ed)	
c.	QUALIF:	IED ME	DICARE	BENEFICIARIE	s WITH 1	NCOMES RELAT	ED TO FED	ERAL POVERTY
	Medical	re ben	or dete eficiar as foll	ermining inco ies under th ows:	me eligi e provis	bility for g	roups of dion 1905(p	qualified (2)(A) of
1.	NON-SEC	CTION	1902(f)	STATES				
a.	Based of level:	on the	follow	ing percent o	of the o	fficial Fede	ral income	poverty
	Eff. Ja	in. 1,	1989:	\sqrt{X} 85 perce	ent	per	cent (no m	ore than 100
	Eff. Ja	n. 1,	1991:	100 percent				
	Eff. Ja	n. 1,	1992:	100 percent				
b.	Levels:	:	•					
		<u>F</u>	amily S	Size	Inc	ome Levels	•	•
			1_	_	\$	-		
			2	-	\$			
					•			
		<u> </u>						
TN N	No. ersedes	92-1	Approv	al Date NOV	1 4 199	4 Fefortin	o Dot-	1-1-92
TN 1		e	5650		·	Effectiv	e Date	

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HCFA ID:

	rsedes	Apr	proval Date	■ <u>NOV 14</u>	1994	Effective Date	te	1-92
TN N	·0.	92-1						
		· · · · · · · · · · · · · · · · · · ·	2		\$			
b.	Levels:		il <u>y Size</u>		Income	<u>Levels</u>		
			92: 100 p					
	Eff. Ja	n. 1, 19	91: 9	5 percent		percent	(no more	than 100
٠	Eff. Ja	n. 1, 19	90:8	5 percent	<u> </u>	percent	(no more	than 100
	Eff. Ja	ın. 1, 19	89: 8	0 percent	<i></i>	percent	(no more	than 100
a.	Based of level:	on the fo	ollowing pe	ercent of	the offi	cial Federal	income pov	rerty
				2.		(1, 198 7 USED		
c.	QUALIF	IED MEDIO				S (Continued) OMES RELATED T	O DEDDOS-	
		State:	Kentuck	(y				
		STATE	PLAN UNDE	R TITLE XI	X OF TH	E SOCIAL SECUR	RITY ACT	·
•	e ision:	Augsut	M-91-4 1991	(BPD)		SUPPLEMENT 1 Page 7 OMB No.: 09:		MENT 2.6
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Revisio	on: HCFA-PM-91-4 August 1991	(BPD)	SUPPLEMENT 1 T Page 8 OMB No.: 0938	O ATTACHMENT 2.6-
	STATE PLAN	UNDER TITLE XIX OF	THE SOCIAL SECURI	TY ACT
	State: Ke	ntucky		
D. MEDI	CALLY NEEDY	INCOME LEVELS (Continued)	
	Applicable to a	all groups	group income le	d below. Excepte
(1)	(2)	(3)	(4)	(5)
Size	Net income level protected for maintenance for months	Amount by which Column (2) exceeds limits specified in 42 CFR 435.1007 ¹	Net income level for persons living in rural areas for months	Amount by which Column (4) exceeds limits specified in 42 CFR 435.1007 1/2
/ \	urban & rural			
	\$ 2.600	. \$	\$	\$\$
2	\$ 3,200	\$	<u>\$</u> \$	\$
3	\$ 3,700	\$\$	\$	\$
4	s 4,600	\$	\$	\$
these	limits.	ods for excluding f of individuals	from its claim for whose income exceed	r FFP is
TN No. Supersede TN No.	92-1 s Approval None	Date NOV 14 199	94 Effective Date	1-1-92

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State	e :	Ken	tucky
State	e:	VC1	ILULKY

INCOME LEVELS (Continued)

D. MEDICALLY NEEDY

(1)	(2)	(3)	(4)	(5)
	Net income level protected for maintenance formonths	Amount by which Column (2) exceeds limits specified in	Net income level for persons living in rural areas for	Amount by which Column (4) exceeds limits specified in
	urban only	42 CFR 435.1007 ¹ /	months	42 CFR 435.1007 ¹
	urban & rural			
5	\$ 5,400	\$	\$	\$
6	s 6,100	\$	\$	Ş
	ş 6,800	\$	\$	\$
8	\$ 7,520	\$	\$	· \$
9	\$ 8,240	\$	\$	\$
10	\$ 8,960	\$	\$	\$
or each ddi- ional erson,				•
dd:	\$ 720	\$	\$	\$

The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.

TN No. 92-1	_		NOV 14 1994			
Supersedes TN No. None	Approval	Date	10114 1034	Effective	Date	-92
				HCFA ID:	7985E	

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August 1991

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:	Kentucky
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INCOME LEVELS (Continued)

- E. Optional Groups Other Than the Medically Needy
 - 1. Institutionalized Individuals Under Special Income Levels as follows:

For individuals covered under 42 CFR 435.231, the special income level shall be 300% of the Supplemental Security Income (SSI) Program federal benefit rate.

TN No. 92-1 Supersedes TN No. None	Approval	Date	NOV 14 1994	Effective	Date _	1-1-92
	•			HCFA ID:	7985E	